#### 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26894

Entity Name: EASTWOOD COMMUNITY ASSOCIATION, INC.

**FILED** Mar 05, 2019 Secretary of State 9831754771CC

# **Current Principal Place of Business:**

2113 RUBY RED BLVD.

SUITE B

CLERMONT, FL 34714

#### **Current Mailing Address:**

EASTWOOD COMMUNITY ASSOCIATION 150 CAVAN LANE ORLANDO, FL 32828 US

FEI Number: 59-2969691 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

EXTREME MANAGEMENT TEAM 2113 RUBY RED BLVD. SUITE B CLERMONT, FL 34714 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: KATHY OLDRO 03/05/2019

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

City-State-Zip:

City-State-Zip:

City-State-Zip:

ORLANDO FL 32828

Title SECRETARY Title DIRECTOR

Name DELLACONA, PATRICIA Name VYCE, RICHARD

**EASTWOOD COMMUNITY** Address 150 CAVAN LANE Address

**ASSOCIATION** City-State-Zip: ORLANDO FL 32828

150 CAVAN LANE

ORLANDO FL 32828 City-State-Zip: **TREASURER** Title

Name SUMNER, KAREN DIRECTOR Title

**EASTWOOD COMMUNITY** Address Name HARTLINE, RYAN

ASSOCIATION Address **EASTWOOD COMMUNITY** 

150 CAVAN LANE **ASSOCIATION** 

ORLANDO FL 32828 150 CAVAN LANE

City-State-Zip: ORLANDO FL 32828 Title **DIRECTOR** 

Name GLINZMAN, LAWRENCE Title **PRESIDENT** 

Address EASTWOOD COMMUNITY Name RAY III, JAMES

ASSOCIATION **EASTWOOD COMMUNITY** Address 150 CAVAN LANE

**ASSOCIATION** 

ORLANDO FL 32828 150 CAVAN LANE

City-State-Zip: ORLANDO FL 32828 VΡ

Title Name MCCALL, JEFFREY Title **DIRECTOR** 

**EASTWOOD COMMUNITY** Address Name BELDEN, PAUL D

ASSOCIATION

Address **EASTWOOD COMMUNITY** 150 CAVAN LANE

**ASSOCIATION** 150 CAVAN LANE

ORLANDO FL 32828 City-State-Zip:

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

03/05/2019 SIGNATURE: JAMES B RAY III **PRESIDENT** 

## Officer/Director Detail Continued:

Title DIRECTOR

Name BLATTE, NEIL H

Address EASTWOOD COMMUNITY ASSOCIATION

150 CAVAN LANE

City-State-Zip: ORLANDO FL 32828

Title DIRECTOR

Name LANG, THOMAS A

Address EASTWOOD COMMUNITY ASSOCIATION

150 CAVAN LANE

City-State-Zip: ORLANDO FL 32828

Title DIRECTOR

Name SMITH, CLYDE W

Address EASTWOOD COMMUNITY ASSOCIATION

150 CAVAN LANE

City-State-Zip: ORLANDO FL 32828

Title DIRECTOR

Name WENDELL, DALLAS

Address EASTWOOD COMMUNITY

ASSOCIATION 150 CAVAN LANE

City-State-Zip: ORLANDO FL 32828

Title DIRECTOR

Name JANECEK, RICHARD

Address EASTWOOD COMMUNITY

ASSOCIATION 150 CAVAN LANE

City-State-Zip: ORLANDO FL 32828